

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA

FREDERICK JACKSON,

Plaintiff,

v.

Civil Action No. 2:06-CV-478-WHA

CO I HOWARD ROBINSON, et al.,

Defendants.

AFFIDAVIT

Before me, the undersigned authority, a Notary Public in and for the State of Alabama at Large, personally appeared Willie J. Thomas, who being known to me and being by me first duly sworn, deposes and says:

My name is Willie J. Thomas. I am currently employed with the Alabama Department of Corrections as a Warden III at Elmore Correctional Facility in Elmore, Alabama. I am over twenty-one (21) years of age.

I hereby certify Department of Corrections Incident Report ECC 06-663 to be a true and correct copy of a document on file at Elmore Correctional Facility.


WILLIE J. THOMAS

STATE OF ALABAMA:

COUNTY OF ELMORE:

Sworn to and subscribed before me and given under my hand and official seal on this the

18th day of July, 2006.



NOTARY PUBLIC

My Commission expires February 3, 2007



STATE OF ALABAMA
DEPARTMENT OF CORRECTIONS

INCIDENT REPORT

1. Institution: Elmore Correctional Center		2. Date: 04-26-06	3. Time: 7:55a.m.	4. Incident Number: ECC 06-663	Class Code:
5. Location Where Incident Occurred: Elmore Recycling Center			6. Type of Incident: Accidental Injury to Self		
7. Time Incident Reported: Approx. 7:55a.m.			8. Who Received Report: Sgt. Robert Esco <i>[Signature]</i>		
9. Victims:					
a. Jackson, Fredrick		Name		AIS	
b. _____		No.		B/214603	
c. _____		No.		_____	
d. _____		No.		_____	
e. _____		No.		_____	
10. Suspects:					
a. n/a		Name		AIS	
b. _____		No.		_____	
c. _____		No.		_____	
d. _____		No.		_____	
e. _____		No.		_____	
11. Witnesses:					
a. n/a		Name		AIS	
b. _____		No.		_____	
c. _____		No.		_____	
d. _____		No.		_____	
e. _____		No.		_____	
f. _____		No.		_____	
g. _____		No.		_____	
PHYSICAL EVIDENCE:					
12. Type of Evidence					
n/a					
13. Description of Evidence:					
n/a					
14. Chain of Evidence:					
a. n/a					
b. _____					
c. _____					
d. _____					
e. _____					
15. Narrative Summary:					
<p>On 4-26-06 at approximately 7:55a.m., inmate Fredrick Jackson, B/214603, informed Officer Howard Robinson, Recycling Officer, that he (inmate Jackson) had gotten his left hand caught in the main incline roller, bottom floor. Officer Robinson observed cuts, scratches, and bruising to the area stated. Inmate Jackson was escorted to ECC Backgate where he was transported to SHCU for medical treatment (see attached Body Chart.) Sgt. Robert Esco was notified of the incident at approximately 8:00a.m. Inmate Jackson was transported back to ECC general population pending further medical treatment.</p>					
 Howard Robinson, COI					

Distribution: ORIGINAL AND ONE (1) COPY to Central I & I Division
COPY to Institutional FileCOPY to Deputy Commissioner of Operations (Class A and B ONLY)
COPY to Central Records Office



PRISON
HEALTH
SERVICES
HOSPITAL

EMERGENCY

ADMISSION DATE 4/25/06	TIME 0810 AM PM	ORIGINATING FACILITY Elmore <input type="checkbox"/> SIR <input type="checkbox"/> PDL <input type="checkbox"/> ESCAPEE <input type="checkbox"/>	<input type="checkbox"/> SICK CALL <input checked="" type="checkbox"/> EMERGENCY <input type="checkbox"/> OUTPATIENT
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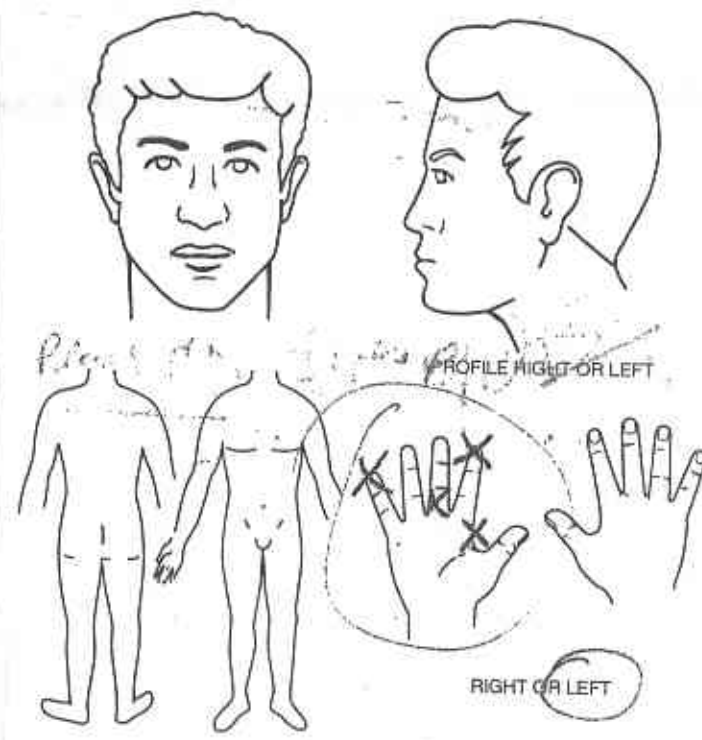
ALLERGIES NICDA	CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA
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VITAL SIGNS: TEMP 97.6 ORAL 98 RECTAL RESP. 20	PULSE 60 B/P 144/92	RECHECK IF SYSTOLIC <100> 50
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NATURE OF INJURY OR ILLNESS S) Hand caught in a machine	ABRASION ///	CONTUSION #	BURN XX XX	FRACTURE Z Z	LACERATION / SUTURES
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PHYSICAL EXAMINATION

D) Tetanus History Unknown
Awake, Alert - Ambulated
to HALL & several wounds
LT Post Hand. Crush injury
to INDEX & small fingers -
laceration approx. 1/2" Base of
Middle finger. Avulsion
laceration web space between
thumb & index. NO tetanus
NO loss of sensation in digits
Difficulty moving LT index.



ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY
Tetanus Toxoid Im 0.5cc	8:30 A	CG
Antibacterial wound cleanser	8:30	CG
D54 - TAD drug	8:30 A	CG

DIAGNOSIS

INSTRUCTIONS TO PATIENT

DISCHARGE DATE 4/25/06	TIME 830 AM PM	RELEASE / TRANSFERRED TO <input checked="" type="checkbox"/> DOC <input type="checkbox"/> AMBULANCE	CONDITION ON DISCHARGE <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL
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NURSE'S SIGNATURE <i>[Signature]</i>	DATE 04/25/06	PHYSICIAN'S SIGNATURE <i>[Signature]</i>	DATE 4/25/06	CONSULTATION
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INMATE NAME (LAST, FIRST, MIDDLE) Jackson, Fredrick	DOC# 214603	DOB 2/1/79	R/S B/m	FAC. EC
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